County: Milwaukee Facility ID: 1180 Page 1

TERRACE AT ST FRANCIS 3200 SOUTH 20TH STREET

MI LWAUKEE Phone: (414) 389-3200 Ownershi p: Non-Profit Church Related 53215 Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled Operate in Conjunction with Hospital? Yes Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/00): 81 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/00): 81 Average Daily Census: 74

Number of Residents on 12/31/00: 74

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/00)	%				
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	59. 5
Supp. Home Care-Personal Care	No					1 - 4 Years	31. 1
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	12. 2	More Than 4 Years	9. 5
Day Services	No	Mental Illness (Org./Psy)	4. 1	65 - 74	9. 5		
Respite Care	No	Mental Illness (Other)	1.4	75 - 84	21.6		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45. 9	**************	******
Adult Day Health Care	No	Para-, Quadra-, Hemi plegic	1.4	95 & 0ver	10.8	Full-Time Equivalen	t
Congregate Meals	No	Cancer	12. 2			Nursing Staff per 100 Re	si dents
Home Delivered Meals	No	Fractures	9. 5		100.0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	17. 6	65 & 0ver	87. 8		
Transportation	No	Cerebrovascul ar	9. 5			RNs	21. 2
Referral Service	No	Diabetes	5.4	Sex	%	LPNs	7. 5
Other Services	No	Respi ratory	8. 1			Nursing Assistants	
Provi de Day Programming for		Other Medical Conditions	31. 1	Male	32. 4	Aides & Orderlies	41. 3
Mentally Ill	No			Female	67. 6		
Provi de Day Programming for			100.0			[
Developmentally Disabled	No				100. 0		

Method of Reimbursement

		Medio (Title			Medic Title			0th	pr	р	ri vate	Pav		Manag	ed Care		Percent
		(1101)	Per Die	`	, 11 01 0	Per Die	m	ocn	Per Die		ii vacc	Per Dien		.,2.,,,,,	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	16	100. 0	\$312. 29	1	5. 9	\$129. 72	0	0. 0	\$0.00	0	0. 0	\$0.00	4	36. 4	\$386.00	21	28. 4%
Skilled Care	0	0.0	\$0.00	15	88. 2	\$110.80	0	0.0	\$0.00	30	100. 0	\$177.00	7	63. 6	\$169.97	52	70. 3%
Intermediate				1	5. 9	\$91.88	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	1	1.4%
Limited Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Traumatic Brain Inj	. 0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Ventilator-Depender	nt 0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	16	100. 0		17 1	00.0		0	0.0		30	100. 0		11	100.0)	74	100.0%

TERRACE AT ST FRANCIS

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Admissions, Discharges, and		Percent Distribution	n of Residents'	Condi ti	ons, Services, a	nd Activities as of 12/	31/00
Deaths During Reporting Period							
				%	Needi ng		Total
Percent Admissions from:		Activities of	%	Ass	sistance of	% Totally	Number of
Private Home/No Home Health	0.8	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents
Private Home/With Home Health	0.0	Bathi ng	13. 5		50. 0	36. 5	74
Other Nursing Homes	0. 2	Dressi ng	14. 9		44. 6	40. 5	74
Acute Care Hospitals	98. 3	Transferring	10. 8		59. 5	29. 7	74
Psych. HospMR/DD Facilities	0.0	Toilet Use	10. 8		62. 2	27. 0	74
Rehabilitation Hospitals	0. 0	Eating	68. 9		9. 5	21. 6	74
Other Locations	0.8	***********	******	******	*******	********	******
Total Number of Admissions	651	Continence		%	Special Treatme	nts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	18. 9	Receiving Res	piratory Care	14. 9
Private Home/No Home Health	73.8	0cc/Freq. Incontine	nt of Bladder	60.8	Receiving Tra	cheostomy Care	0. 0
Private Home/With Home Health	0.0	0cc/Freq. Incontine	nt of Bowel	36. 5	Recei vi ng Suc	ti oni ng	0. 0
Other Nursing Homes	4.3				Receiving Ost	omy Care	2. 7
Acute Care Hospitals	12.3	Mobility			Recei vi ng Tub	e Feeding	2. 7
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mec	hanically Altered Diets	28. 4
Rehabilitation Hospitals	0. 0						
Other Locations	1.5	Skin Care			Other Resident	Characteri sti cs	
Deaths	8. 1	With Pressure Sores		21.6	Have Advance	Di recti ves	79. 7
Total Number of Discharges		With Rashes		2.7	Medi cati ons		
(Including Deaths)	652				Receiving Psy	choactive Drugs	51. 4
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 $Selected\ Statistics:\ This\ Hospital\ - Based\ Facility\ Compared\ to\ Similar\ Facilities\ \&\ Compared\ to\ All\ Facilities$

************************************* Thi s Other Hospital-Al l Facility **...** Based Facilities Facilties | % % % Ratio Ratio Occupancy Rate: Average Daily Census/Licensed Beds 91.4 87.5 1.04 84. 5 1.08

Current Residents from In-County 94.6 83.6 1.13 77. 5 1.22 Admissions from In-County, Still Residing 6. 1 14. 5 0.42 21.5 0.29 Admissions/Average Daily Census 879.7 194. 5 4. 52 124. 3 7.08 Discharges/Average Daily Census 881. 1 199.6 4.41 126. 1 6.99 Discharges To Private Residence/Average Daily Census 650.0 102.6 6.34 49. 9 13.04 Residents Receiving Skilled Care 98. 6 91. 2 1.08 83. 3 1.18 Residents Aged 65 and Older 87.8 91.8 0.96 87. 7 1.00 Title 19 (Medicaid) Funded Residents 23. 0 66.7 0.34 **69.** 0 0.33 Private Pay Funded Residents 40. 5 23. 3 1.74 22.6 1.79 Developmentally Disabled Residents 0.0 0.00 7. 6 0.00 1.4 Mentally Ill Residents 5.4 30.6 0.18 33. 3 0.16 General Medical Service Residents 31.1 19. 2 1.62 18. 4 1.69 54. 1 51.6 1.05 49. 4 1.09 Impaired ADL (Mean)* 0.97 Psychological Problems 51.4 52.8 **50**. 1 1.03 Nursing Care Required (Mean)* 9. 1 7. 2 7.8 1.17 1. 28